

PART B - FEE(S) TRANSMITTAL

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7590 10/06/2006

DR. MARK FRIEDMAN LTD.
 c/o Bill Polkinghorn
 Discovery Dispatch
 9003 Florin Way
 Upper Marlboro, MD 20772

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 Sarah Lau

(Depositor's name)

 (Signature)

March 29, 2007 (via e-filing) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/078,007	02/20/2002	Nitzan Arzi	2098/12	6178

TITLE OF INVENTION: WIRELESS PRIVATE BRANCH EXCHANGE (WPBX) AND COMMUNICATING BETWEEN MOBILE UNITS AND BASE STATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	01/08/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
CONTEE, JOY KIMBERLY	2617	455-555000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form, PTO/SB/122 attached).
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 02-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm having as a member a registered patent attorney or agents and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

David W. Carstens

Carstens & Cahoon, LLP

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assigned data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Commil USA, LLC

The Woodlands, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies

4b. Payment of Fee(s): (Please first resupply any previously paid issue fee shown above)

- A check is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-01392 (enclose an extra copy of this form).

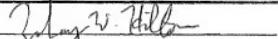
5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date March 29, 2007

Typed or printed name Zachary W. Hilton

Registration No. 58897

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